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02/08/2006 FPATTERS 00000001 502548 10081023

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICATION NO.

10/081,023

CONFIRMATION NO.:

2905

APPLICANT

Jawed Asrar et al.

FILED:

February 21, 2002

TC/A.U.

1617

EXAMINER

S. Mark Clardy

DOCKET NO.

17396/09057

CUSTOMER NO.

n/a

DEPOSIT ACCT. NO.

50-2548

RESPONSE TO OFFICE ACTION UNDER 37 C.F.R. §1.111

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

This is filed In response to the Office Action of October 24, 2005, and is intended to be responsive to every issue that was raised in that Action. This Response is believed to be timely with respect to the shortened statutory period for replay of three months that was set forth in the Action.

There are no Amendments to the Specification.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

There are no Amendments to the Drawings.

Remarks/Arguments begin on page 11 of this paper.

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EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply. Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1)	(Col. 1) (Col. 2) (Col. 3)						OTHER THAN A SMALL ENTITY					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE			ADDIT. FEE				
TOTAL	77		63	=	14	x	\$	700.00	_=	\$	700.00		
INDEP.	2		8	=	0	x	\$	200.00	=	\$	0.00		
FIRST PR	ESENTATION O	F MUL	TIPLE DEI	. CLA	IM	+	\$	0.00	=	\$	0.00		
					TO	OTAL	ADI	DIT. FEE		\$	700,00		

Total additional fee for claims required

\$700.00

Submission of an Information Disclosure Statement after 1st Office Action (37 C.F.R. 1.17(p))

\$180.00

FEE PAYMENT

5. Attached is a check in the sum of \$880.00.

Charge any additional fees required by this paper or credit any overpayment to Deposit Account No. 50-2548.

A duplicate of this paper is attached.

FEE DEFICIENCY

6. If an extension fee is required, charge Deposit Account No. 50-2548. If a fee for claims is required, charge Deposit Account No. 50-2548.

Date: January 13, 2006

Signature of Practitioner

Reg. No.: 35,124

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